## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

	£17 E#		
DISTRIBUTION			
BANTA PE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
TRANSPORTER	DAS		
OPERATOR			
PRORATION OFFICE			

## OIL CONSERVATION DIVISION

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

FILE		F. O	, BOX 2086			• '
U.S.G.S.	S	ANTA FE, I	NEM WEXICO	87501		
TRANSPORTER OIL						, g.
DAS	/	" REQUEST	FOR ALLOWABL	_E	•	
OPERATOR PRORATION OFFICE	-		AND	•		क्ता असे
T	AUTHORIZ	ATION TO TR	ANSPORT OIL AN	ID NATURAL G	AS	T. (2017) 1874
Operator		<del> </del>				
CHEVRON U.S.A. INC.	. <del></del>		····	<del></del>		
P. O. Box 670, Hobbs	s. NM 88240	l	,			1. 全海 x ∰
Reason(s) for filing (Check proper b	or)		Oth	er (Please explai	n/	<del></del>
New Aell		ransporter of:	_	Name Chang	e Effective 7-1-85	1
Recompletion  X Change in Ownership	Casingh	-ad Gas [	Dry Gas Condensate			
If change of ownership give name and address of previous owner	Gulf Oil C	orp., P. 0	Box 670, H	lobbs, NM	88240	
II. DESCRIPTION OF WELL A	ND LEASE		-			"i
Lease Name	Well No.   Po	ool Name, includi	_	Kind o	I Lease	Lease No.
Bertie Whitm	ire 9	Euni	ce Monur	ment siate.	Federal or Fee FCC 12	
Location		3	· •	_		
Unit Letter H :	1980 Feet From 7	rno <u>North</u>	_Line and33	<u>)                                    </u>	From The East	•
Line of Section S	ownship 20 5	Range	37 E	, NMPM,	Lea	County
III. DESIGNATION OF TRAN	SPORTER OF OIL	AND NATU	RAL GAS			Aprel Comment
Name of Authorized Transporter of C	or Cond	enacte		address to which	approved copy of this form is	
1 TA						1. 1. 2. 2. 2. 2. 1
Name of Authorized Transporter of C	asinghead Gas 🗔	or Dry Gas	Address (Give	eddress to which	approved copy of this form is	to be sent)
·	Unit Sec.	Twp. Rge	. Is gas actuali	v connected?	When	
If well produces oil or liquids, give location of tanks.	, 5			, commercial,		
If this production is commingled	with that from any c	other lesse or p	ool, give commingl	ling order numbe	r:	,
NOTE: Complete Parts IV and	l V on reverse side	if necessary.		¥		
VI. CERTIFICATE OF COMPLL	ANCE	• .		OIL CONTE	RYATION 9850N	
I hereby certify that the rules and regula	itions of the Oil Conse	tvation Division I	APPROVE	7D		, 19
been complied with and that the informa my knowledge and belief.	tion given is true and o	omplete to the be	st of BY	PARLI	Set ton	· · · · · · · · · · · · · · · · · · ·
			1 //	DIS	TRICT 1 SUPERVISOR	
$\Omega$	: ,	•	TITLE -			<del></del>
(Y(1)/L)	10				d in compliance with RUL	
Sia:	nature)	<del></del>	If this	is a request for orm must be acc	r allowable for a newly dril companied by a tabulation	led or deepened
Area Engine	-		tests taken	on the well in	accordance with AULE 11	1.
Area Engline	(C.)		-    All asc	ctions of this fo	rm must be filled out compl	etaly for attan.

able on new and recompleted wells.

Fill out only Sections I. II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.